



**CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
CONSULTING COMMUNICABLE DISEASE REPRESENTATIVE
Open Examination**

Final Filing Date: October 2, 2014
Bulletin Release Date: September 2, 2014

KI34 -9051 4H1AH



California State Government supports equal opportunity to all regardless of race, color, creed, national origin, ancestry, gender, marital status, disability, religious or political affiliation, age, or sexual orientation. It is an objective of the State of California to achieve a drug-free work place. Any applicant for state employment will be expected to behave in accordance with this objective because the use of illegal drugs is inconsistent with the law of the state, the rules governing civil service, and the special trust placed in public servants.

EXAMINATION TYPE: This is an open examination. Applications for this examination will not be accepted on a promotional basis. Career credits will not be granted.

WHO SHOULD APPLY: Persons who meet the minimum qualifications (entrance requirements) as stated on this announcement may take this examination, which is competitive.

HOW TO APPLY: Applications (STD. 678) and Supplemental Applications (page four) must be submitted via the U.S. Postal Service or hand delivered to the California Department of Public Health Human Resources Office (hours are 8:00 AM to 5:00 PM). Standard State Applications (STD. 678) can be found at: <http://jobs.ca.gov/pdf/std678.pdf>. Submit hard copies to:

Mailing Address:
California Department of Public Health
Selection & Certification Unit
MS 1700-1702
P.O. Box 997378
Sacramento, CA 95899-7378

File in Person Address:
California Department of Public Health
Selection & Certification Unit
1501 Capitol Avenue, Suite 71.1501
Sacramento, CA 95814
Telephone: (916) 319-9759

DO NOT SUBMIT APPLICATIONS TO THE STATE PERSONNEL BOARD OR THE CALIFORNIA DEPARTMENT OF HUMAN RESOURCES. ALSO, THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH WILL NOT ACCEPT APPLICATIONS SENT ONLINE, VIA INTER-AGENCY MAIL OR FAX.

FINAL FILING DATE: Applications (STD. 678) and Supplemental Applications must be submitted by **October 2, 2014**, the final filing date. Applications postmarked or personally delivered after the filing deadline will not be accepted.

SALARY RANGES: \$ 3731.00 - 4671.00 per month.

EMPLOYEE BENEFITS: In addition to the salary above the California Department of Public Health offers benefits in the following areas:

- Health, Dental, and Vision
- Cash Benefit Programs
- Disability Insurance
- Work, Home, and Family
- Beneficiary and Survivor Benefits
- Awards
- Retirement and Separation Benefits
- Flexible Schedules
- Public Transit Reimbursement (limits apply)

A complete list of all benefits may be viewed at <http://www.calhr.ca.gov/employees/Pages/salary-and-benefits.aspx>

POSITION DESCRIPTION: With areawide or statewide responsibility, to coordinate a major function with a communicable disease program such as Area VD Screening Coordinator, statewide community relations or information/education specialist; plans, organizes and implements studies or ongoing programs in clinics, hospitals, private medical facilities; work with field investigative personnel to obtain necessary data or implement special projects; consult with and maintain harmonious relationships with local health officials, community organizations, educational facilities, field investigative staff to accomplish objectives.

Positions may exist with the California Department of Public Health in Santa Clara County, Fresno County, Sacramento County, Kern County and Los Angeles County. This classification does require regular travel away from your position location.

REQUIREMENTS FOR ADMITTANCE TO THE EXAMINATION: It is your responsibility to make sure you meet the education and/or experience requirements stated on this announcement by **October 2, 2014**, the final filing date. Your signature on your application indicates that you have read, understood, and possess the basic qualifications required.

NOTE: Applications/resumes **must** include "to" and "from" dates (month/day/year), time base, civil service class title(s), and range (if applicable) for all work experience. College course information **must** include title, number of semester or quarter units, name of institution, completion dates, and degree (if applicable).

Applications/resumes received without this information will be rejected. A copy of your official degree and transcripts may assist in the evaluation of your qualifications as it relates to meeting the education requirements for this examination.

MINIMUM QUALIFICATIONS: Qualifying experience may be combined on a proportionate basis if the following requirements include more than one pattern and are distinguished as either I, or II, or III, etc.

Either I

Experience: Two years of experience performing duties equivalent to Communicable Disease Representative, Range B.
And

Education: Completion of 60 semester units of college level academic education.

Or II

Experience: Three years of experience as a medical service corpsperson dealing with communicable diseases or as a communicable disease representative or investigator in a local, State or Federal health agency.

And

Education: Equivalent to graduation from college. (Additional qualifying experience may be substituted on a year-for-year basis for two years of the required education.)

GENERAL QUALIFICATIONS: In addition to the scope defined on this announcement, candidates must possess essential personal qualifications including integrity, initiative, dependability, good judgment, ability to work cooperatively with others, and a state of health consistent with the ability to perform the assigned duties of the class. A medical examination may be required.

EXAMINATION INFORMATION: The examination will consist of a Supplemental Application that is weighted 100%. Applicants are required to respond to the following **five** supplemental items. These supplemental items are designed to identify job achievement in specific areas that demonstrates ability to successfully perform at the Consulting Communicable Disease Representative level. Responses to the supplemental items will be assessed based on predetermined job-related rating criteria. In appraising the relative qualifications of candidates, consideration will be given to the extent and type of pertinent experience and education over and above that required under the minimum qualifications.

The California Department of Public Health reserves the right to revise the examination plan to better meet the needs of the service if the circumstances under which this examination was planned change. Such revision will be in accordance with civil service law and rules and all competitors will be notified.

EXAMINATION SCOPE: In addition to evaluating the candidate's relative abilities as demonstrated by quality and breadth of experience, emphasis will be placed on measuring, relative to job demands, each competitor's:

KNOWLEDGE OF:

1. Knowledge of conflict resolution techniques to address and deal with conflicts and issues that may arise in the work group such that a positive, cooperative, professional work environment results.
2. Knowledge of cultural differences of a diverse subordinate staff to ensure that supervisory decisions and expectations related to staff interaction, work task completion, assignment of work, and general oversight activities take into consideration the needs of each staff member individually and collectively.
3. Knowledge of proper spelling, grammar, punctuation and sentence structure to ensure that written material prepared and reviewed are complete, succinct, and free of mechanical errors.
4. Knowledge of the department's required format, style, and standards for written materials to ensure that materials prepared and reviewed are complete, accurate and in conformance with such standards.

5. Knowledge of departmental trends and philosophies to ensure that the progress and completion of work assignments and tasks conform to the overall objectives of the department.
6. Knowledge of programs related to general disease control including sexually transmitted diseases, human immunodeficiency virus and other various communicable diseases, public health, policies, and protocols.
7. Knowledge of subsidiary organization to ensure that the efforts and accomplishments of the department and related public health programs, corresponds with the overall operations of the department.
8. Knowledge of modes of transmission, diagnosis, and treatment control procedures for sexually transmitted diseases, human immunodeficiency virus and other various communicable diseases to prevent the spread of diseases.
9. Knowledge of techniques of communicable disease control to interrupt the spread of disease and to educate patients and health providers.
10. Knowledge of clinical tests, laboratory operations, diagnostic tests and methods of enforcement to ensure compliance with public health laws, rules and regulations.
11. Knowledge of community organization and health education methods and techniques.
12. Knowledge of basic mediation and negotiation techniques to effectively and appropriately approach complex situations and circumstances that requires compromise or concession from one or more involved parties.

ABILITY TO:

1. Ability to conduct confidential interviews of a highly personal nature to perform investigative and referral work resulting in medical evaluation and treatment for infected and/or suspected infected patients and their at-risk-partners.
2. Ability to travel and work irregular hours.

SUPPLEMENTAL APPLICATION: Each applicant for this examination **must** complete and submit responses to the **five** supplemental items that follow. Answer questions independently and completely; incomplete responses and omitted information cannot be considered or assumed. Resumes, letters of reference, and other materials will not be evaluated or considered as responses to items in the supplemental application. **YOUR RESPONSES ARE SUBJECT TO VERIFICATION** and should be an accurate reflection of your personal experience. Applications received without responses to the supplemental items will be rejected.

INSTRUCTIONS: When responding to the supplemental items, please follow these guidelines:

- Your responses must be typewritten or generated by word processing on 8½" X 11" paper.
- Your font should be typed in 12 pt., Arial font.
- Your responses must be limited to one page per item.
- Identify each page with your full name.
- Make sure your responses are complete, specific, clear, and concise.
- Answer each numbered item separately, indicating the corresponding item number for each response. (You may include multiple responses on a single page.)
- Include place of employment, pertinent dates, duties performed, examples, etc., when responding to items.
- In the event that one particular job contained responsibilities applicable to several items, separate the different functions of the job in order to respond to all items completely.
- Please return your state application (678), two copies of the Supplemental Items and the Conditions of Employment (631) to the address listed on the bulletin.

NOTE: Resumes, letters, and other materials will not be evaluated or considered as responses to the supplemental items.

SUPPLEMENTAL APPLICATION ITEMS

1. It is state law for laboratories and physicians to report every positive communicable disease test to the local Health Department. Recently, you have not received any reports from a physician who regularly reports many positive test results.

Describe what action you should take to ensure that the physician is being compliant with state law.

2. You have been assigned to work with medical staff at a student health center that is experiencing a communicable disease outbreak.

Describe how you should coordinate screening activities for this outbreak.

3. You have been asked by the Communicable Disease Manager of the local health jurisdiction to coordinate a special outreach event targeting a specific at risk population.

Describe how you should coordinate this event.

4. You have been assigned a client report of a patient that you are having difficulty locating. You have made contact with the hospital for further information but due to Health Insurance Portability and Accountability Act (HIPAA) regulation they cannot release any information to you.

Describe the actions you should take to ensure this issue is resolved.

5. You have been asked to give a presentation on communicable disease trends. Upon gathering all your data you encounter discrepancies between local and state data.

Describe how you should handle this situation.

ELIGIBLE LIST INFORMATION: Possession of the entrance requirements does not assure a place on the eligible list. In order to obtain a position on the eligible list, a minimum rating of 70% must be attained. A departmental open list will be established for use by the department(s) listed on this announcement. The list will expire 24 months after it is established unless the needs of the service and conditions of the list warrant a change in this period.

Eligible lists established by competitive examination, regardless of date, must be used in the following order: 1) sub-divisional promotional, 2) departmental promotional, 3) multi-departmental promotional, 4) service-wide promotional, 5) departmental open, and 6) open. When there are two lists of the same kind, the older must be used first.

VETERANS' PREFERENCE: Will be awarded in this examination, pursuant to Government Code Section 18973.1, effective January 1, 2014, as follows: 1) Any veteran, widow or widower of a veteran, or spouse of a 100 percent disabled veteran, who achieves a passing score in an entrance examination, shall be ranked in the top rank of the resulting eligibility list. Any veteran who has been dishonorably discharged or released is not eligible for veterans' preference; 2) An entrance examination is defined, under the law, as any open competitive examination; 3) Veterans' Preference is not granted once a person achieves permanent civil service status.

HOW TO APPLY FOR VETERANS' PREFERENCE: The California Department of Human Resources (CalHR) has information on how to apply for Veterans' Preference on their website at www.jobs.ca.gov and on the Application for Veterans' Preference form ([CalHR 1093](#)). Additional information is also available at the Department of Veterans Affairs website at www.cdva.ca.gov.

TDD is Telecommunications Device for the Deaf and is reachable only from phones equipped with a TDD device.

The California Relay (Telephone) Service for the deaf or hearing impaired:
MCI from TDD: 1-800-735-2929 MCI from voice telephone: 1-800-735-2922
Sprint from TDD: 1-888-877-5378 Sprint from voice telephone: 1-888-877-5379

California Department of Public Health
SECURITY INFORMATION FOR PARTICIPANTS
Preparation, Development, Review of
State Civil Services Examination Material

EXAMINATION TITLE: Consulting Communicable Disease Representative

State law requires that civil service examinations are confidential and impartial. We ask that you assume a personal responsibility in maintaining the competitive aspects and confidential nature of this examination. The personal information that you provide on this form is required for documentation purposes. All information will remain confidential.

As a candidate, you must comply with the following test security standards:

1. DO NOT REVEAL the fact that you are participating in the examination process to anyone.
2. DO NOT DISCUSS any aspect of the examination with anyone. This includes supervisors, peers and co-workers. This security limitation includes information on all questions and answers.

I certify that:

1. I will not reveal to anyone that I am participating in this examination.
2. I will not discuss any aspect of this material with anyone.
3. I will adhere to all the established security measures.

I hereby certify and understand that the information provided by me in this supplemental application is true and complete to the best of my knowledge and contains no willful misrepresentation or falsification. I further understand that this information may be verified and that, if it is discovered I have made any false representations, I will be removed from the promotional list resulting from this examination, and possibly dismissed from civil service.

Signature

Date

Printed Name

Return this page with your original signature along with your Supplemental Application.

Please ensure that your return envelope has adequate postage. Facsimiles (FAX) or electronic versions (email) will not be accepted under any circumstance.

CONDITIONS OF EMPLOYMENT (631)

Title: Consulting Communicable Disease Representative

Name: _____
(Print: first, middle initial, last)

FFD: October 2, 2014

If you are successful in your examination your name will be placed on the active employment list and certified to fill vacancies according to the conditions you specify on this form. If you are unwilling to accept work or do not reply promptly to communications your name will be placed on the inactive list.

Locations in which you are willing to work:

Please check your choices - you will not be offered a job in locations not checked.

☐ 0100 Alameda
☐ 4300 Santa Clara
☐ 1000 Fresno
☐ 3400 Sacramento
☐ 1500 Kern
☐ 1900 Los Angeles

TYPE OF EMPLOYMENT DESIRED:

☐ Full Time ☐ Part Time (regular hours less than 40) ☐ Intermittent (on call)
☐ Limited Term

*Please note- this classification does require regular travel away from your position location.

It is your responsibility to notify the Department of Public Health, Examination Unit, of any changes in your address or availability for employment. All correspondence must include your examination title, identification number and Social Security number.

Signature: _____ Date: _____

Return this page with your original signature along with your Supplemental Application.